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PTO/SB/21 (09-04)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

3

Application Number

10/792,013

Filing Date

3/3/2004

First Named Inventor

RABINOWITZ, Joshua D.

Art Unit

1616

Examiner Name

Not Yet Assigned

Attorney Docket Number

00010.04CON

ENCLOSURES (Check all that apply)

☐

Fee Transmittal Form

☐

Fee Attached

☐

Amendment/Reply

☐

After Final

☐

Affidavits/declaration(s)

☐

Extension of Time Request

☐

Express Abandonment Request

☐

Information Disclosure Statement

☐

Certified Copy of Priority Document(s)

☐

Reply to Missing Parts/
Incomplete Application

☐

Reply to Missing Parts
under 37 CFR 1.52 or 1.53

☐

Drawing(s)

☐

Licensing-related Papers

☐

Petition

☐

Petition to Convert to a
Provisional Application

☒

Power of Attorney, Revocation
Change of Correspondence Address

☐

Terminal Disclaimer

☐

Request for Refund

☐

CD, Number of CD(s) _____

☐ Landscape Table on CD

☐

After Allowance Communication to TC

☐

Appeal Communication to Board
of Appeals and Interferences

☐

Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

☐

Proprietary Information

☐

Status Letter

☒

Other Enclosure(s) (please identify
below):

Statement under 37 CFR 3.73(b)

Remarks

Power of Attorney and Correspondence Address Indication Form (1 pp.)
Statement under 37 CFR 3.73(b) (1 pp.)
Return Postcard

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

ALEXZA Molecular Delivery Corporation, 1001 East Meadow Circle, Palo Alto, CA 94303

Signature

Printed name

William L. Leschensky (Tel.: 650-687-3926)

Date

FEB 01 2005

Reg. No.

38,951

CERTIFICATE OF TRANSMISSION/MAILING

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Signature

Typed or printed name

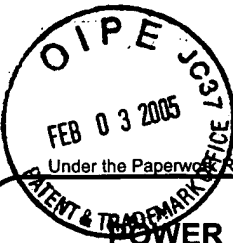
William L. Leschensky

Date

FEB 01 2005

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PTO/SB/81 (11-04)

Approved for use through 11/30/2005. OMB 0651-0035

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/792,013
Filing Date	3/3/2004
First Named Inventor	RABINOWITZ, Joshua D.
Title	DELIVERY OF DIAZEPAM THROUGH ...
Art Unit	1616
Examiner Name	Not Yet Assigned
Attorney Docket Number	00010.04CON

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

37485

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

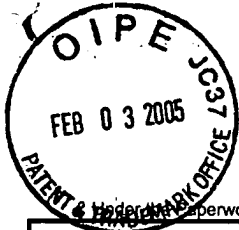
Signature		Date	FEB 01 2005
Name	James V. CASSELLA	Telephone	650-687-3900
Title and Company	Sr. VP, Research & Development; ALEXZA Molecular Delivery Corporation		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: ALEXZA Molecular Delivery Corporation

Application No./Patent No.: 10/792,013 Filed/Issue Date: 3/3/2004

Entitled: DELIVERY OF DIAZEPAM THROUGH AN INHALATION ROUTE

ALEXZA Molecular Delivery Corporation, a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 013300, Frame 0779, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

James V. Casella
Signature

James V. CASSELLA

Printed or Typed Name

FEB 01 2005

Date

650-687-3900

Telephone Number

Sr. VP, Research & Development; ALEXZA Molecular Delivery Corporation
Title

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